Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself			
			About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1. Yo		r full name			
		e the name that is on	Bajram	_	
	your government-issued picture identification (for example, your driver's	First name		First name	
	licer	ise or passport).	Middle name		Middle name
		g your picture	Balidemic		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)		Last name and Suffix (Sr., Jr., II, III)	
2.		other names you have d in the last 8 years			
	maio assu	ude your married or den names and any umed, trade names and og business as names.			
	Do N any such parti	NOT list the name of separate legal entity n as a corporation, nership, or LLC that is filling this petition.			
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-8198		

Deb	otor 1	Bajram Balidemio	:	Case number (if known)		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	ldent	Employer ification Number , if any.				
			EIN	EIN		
5. Where you live			If Debtor 2 lives at a different address:			
			360 Ocean Parkway 2E Brooklyn, NY 11218			
			Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
			Kings	County		
			County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.			If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
			Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why this o	you are choosing	Check one:	Check one:		
		ruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this peti have lived in this district longer than in any district.		
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Dec	tor 1 Bajram Balidemic					Case number (if known)	
Par	Tell the Court About	Your Bank	ruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	■ Chap	ter 7				
		☐ Chap	ter 11				
		☐ Chap	ter 12				
		☐ Chap	ter 13				
8.	How you will pay the fee	abo	out how yo	ou may pay. Typica attorney is submitt	lly, if you are paying the fee y	ck with the clerk's office in your local cou ourself, you may pay with cash, cashier nalf, your attorney may pay with a credit	s check, or money
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).				
		☐ I re	equest that t is not req	at my fee be waive uired to, waive you	ed (You may request this option of the contract of the contrac	on only if you are filing for Chapter 7. By our income is less than 150% of the office	cial poverty line that
						in installments). If you choose this option icial Form 103B) and file it with your peti	
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	□ No.	Go to I	ine 12.			
	residence.	Yes.	Has yo	our landlord obtaine	ed an eviction judgment again	st you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial</i> bankruptcy petitio		Judgment Against You (Form 101A) an	d file it with this

Deb	tor 1 Bajram Balidemic	;			Case number (if known)	
Par	Report About Any Bu	ısinesses	You Owr	as a Sole Propriet	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	e and location of busi	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, State	e & ZIP Code	
	it to this petition.		Chec	k the appropriate box	to describe your business:	
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a <i>small business</i> <i>debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed you are o	under Suchoosing to stateme (B).	bchapter V so that it of the total to be the total t	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S. details.	
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am I Code		1, but I am NOT a small business debtor according to the definition in the Bankruptcy	,
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.	nd
		☐ Yes.			11, I am a debtor according to the definition in $\S$ 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.	I
Par	Report if You Own or	Have Any	/ Hazardo	ous Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat	☐ Yes.				
	of imminent and identifiable hazard to public health or safety?	_ 100.	What is	the hazard?		
	Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?		
					Number, Street, City, State & Zip Code	

Debtor 1 Bajram Balidemic Case number (if known) Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court whether You must check one: You must check one: you have received a ☐ I received a briefing from an approved credit I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a certificate of completion. completion. The law requires that you Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if receive a briefing about plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. ☐ I received a briefing from an approved credit You must truthfully check I received a briefing from an approved credit one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have choices. If you cannot do so, you are not eligible to a certificate of completion. of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you filed for bankruptcy. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days.

> Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

#### Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability. П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. this bankruptcy petition, and I received a certificate of

this bankruptcy petition, but I do not have a certificate

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Bajram Balidemic					Case number (if known)		
Par	t 6:	Answer These Questi	ons for Repo	orting Purposes			
		kind of debts do	16a. <b>A</b> ı	e your debts primarily consun	<b>debts primarily consumer debts?</b> Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an primarily for a personal, family, or household purpose."		
				No. Go to line 16b.			
				Yes. Go to line 17.			
					ss debts? Business debts are debts than or through the operation of the busine		
				No. Go to line 16c.			
				Yes. Go to line 17.			
			16c. St	ate the type of debts you owe the	at are not consumer debts or business o	debts	
17.		ou filing under ter 7?	□ No. I a	ım not filing under Chapter 7. Go	to line 18.		
	after prope	ou estimate that any exempt erty is excluded and			u estimate that after any exempt propert e to distribute to unsecured creditors?	y is excluded and administrative expenses	
		nistrative expenses aid that funds will		No			
		ailable for bution to unsecured tors?		Yes			
18.	How many Creditors do		<b>■</b> 1-49		□ 1,000-5,000	□ 25,001-50,000	
	you e owe?	estimate that you	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000	
			□ 100-199 □ 200-999		□ 10,001-25,000	☐ More than100,000	
19.		Stimata Valir assats ta	<b>=</b> \$0 - \$50,		\$1,000,001 - \$10 million	\$500,000,001 - \$1 billion	
	be worth?	□ \$50,001 · □ \$100,001 □ \$500,001	- \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.		much do you ate your liabilities	□ \$0 - \$50, □ \$50,001		☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion	
	to be		<b>\$100,001</b>	- \$500,000	□ \$50,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
			□ \$500,001	- \$1 million	<b>—</b> \$100,000,001 - \$500 Hillion	U Wore than 400 billion	
Par	t 7:	Sign Below					
For	you		I have exam	ined this petition, and I declare u	under penalty of perjury that the informat	ion provided is true and correct.	
					aware that I may proceed, if eligible, un vailable under each chapter, and I choo		
If no attorney represents me and I did not pay or agree to pay document, I have obtained and read the notice required by 11					n attorney to help me fill out this		
			I request reli	ef in accordance with the chapte	er of title 11, United States Code, specific	ed in this petition.	
			bankruptcy of and 3571.	case can result in fines up to \$25	ealing property, or obtaining money or p 0,000, or imprisonment for up to 20 yea	roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,	
			/s/ Bajram Bajram Ba Signature of		Signature of Debtor 2		
			Executed or	January 23, 2023 MM / DD / YYYY	Executed on MM / E	DD / YYYY	

Debtor 1 Bajram Balidemic	:	Case r	Case number (if known)		
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	under Chapter 7, 11, 12, or 13 of title 11, Unifor which the person is eligible. I also certify	ted States Code, and have exp that I have delivered to the del	clare that I have informed the debtor(s) about eligibility to proceed tode, and have explained the relief available under each chapter delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) t I have no knowledge after an inquiry that the information in the		
io ino uno pagoi	/s/ Paul Hollender	Date	January 23, 2023		
	Signature of Attorney for Debtor		MM / DD / YYYY		
	Paul Hollender Printed name				
	Corash & Hollender				
	Firm name				
	1200 South Avenue				
	Suite 201				
	Staten Island, NY 10314				
	Number, Street, City, State & ZIP Code				
	Contact phone <b>718-442-4424</b>	Email address	info@silawfirm.com		
	NY				
	Bar number & State		_		

Fill	in this inform	ation to identify your	case:				
Deb	otor 1	Bajram Balidemi	C				
D - I	0	First Name	Middle Name	Last Name			
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name			
Uni	ted States Ban	kruptcy Court for the:	EASTERN DISTRICT O	OF NEW YORK			
	se number					_	if this is an
						ameno	ed filing
Of	ficial For	m 106Sum					
				nd Certain Statistical			2/15
nfo	rmation. Fill o	ut all of your schedul	es first; then complete tl	e are filing together, both are eq ne information on this form. If you k the box at the top of this page	ou are filing amende		
Par	t 1: Summa	rize Your Assets					
						Your as Value of	sets what you own
1.	Schedule A/ 1a. Copy line	<b>B: Property</b> (Official Fe 55, Total real estate, t	orm 106A/B) rom Schedule A/B			\$	0.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B.			\$	2,610.00
	1c. Copy line	e 63, Total of all propert	y on Schedule A/B			\$	2,610.00
Par	t 2: Summa	rize Your Liabilities					
						Your lia Amount	<b>bilities</b> you owe
2.			laims Secured by Property mn A, Amount of claim, at	(Official Form 106D) the bottom of the last page of Par	t 1 of Schedule D	\$	0.00
3.			Unsecured Claims (Official 1 (priority unsecured claim	al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>		\$	1,660.00
	3b. Copy the	e total claims from Part	2 (nonpriority unsecured of	claims) from line 6j of Schedule E/I	F	\$	195,244.03
				Y	our total liabilities	\$	196,904.03
Par	t 3: Summa	arize Your Income and	l Expenses		L		
4.		Your Income (Official Formbined monthly incom		ə I		\$	2,496.96
5.		Your Expenses (Officia onthly expenses from I				\$	2,409.00
Par	t 4: Answei	r These Questions for	Administrative and Stat	istical Records			
6.	-	• • •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this form	n to the court with you	r other sch	edules.
7.	■ Yes What kind o	f debt do you have?					
	Your de	ebts are primarily con		debts are those "incurred by an incompleted by a		personal,	family, or
					•	h = =	handa alada da a
Offi	Your de licial Form 1069			ve nothing to report on this part of ilities and Certain Statistical Info			bmit this form to age 1 of 2

Debtor 1	Bajram Balidemic	Case number (if known)	
the court with your other schedules.			

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

1,291.33

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,660.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	1,660.00

Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Bajram Balidemi			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK	
Case number				☐ Check if this is an
				amended filing
Official Fo	rm 106A/B			
<b>Schedul</b>	e A/B: Prop	erty		12/15
think it fits best. B	se as complete and accur e space is needed, attach	ate as possible. If two marrie	once. If an asset fits in more than one category, list ed people are filing together, both are equally respo m. On the top of any additional pages, write your na	nsible for supplying correct
Part 1: Describe	Each Residence, Buildin	g, Land, or Other Real Estate	e You Own or Have an Interest In	
1. Do you own or	have any legal or equitab	e interest in any residence, l	building, land, or similar property?	
No. Go to Par	rt 2.			
☐ Yes. Where i	s the property?			
Part 2: Describe	Your Vehicles			
			nicles, whether they are registered or not? Include G: Executory Contracts and Unexpired Lease	
3. Cars, vans, tr	ucks, tractors, sport u	tility vehicles, motorcycle	es	
■ No				
☐ Yes				
			nal vehicles, other vehicles, and accessories seels, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			ntries from Part 2, including any entries for	=> \$0.00
Part 3: Describe	Your Personal and Hous	sehold Items		
Do you own or	have any legal or equi	table interest in any of the	e following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings	e, linens, china, kitchenware	e	
□ No		.,s.io, simia, monoriwan	-	
Yes. Desc	ribe			
	Househo	ld goods and furnishir	ngs	\$1,500.00

D	ebtor 1	Bajram Balidemic	Case number (if known)	
7.	Electron Example		d digital equipment; computers, printers, scanners; music ogames	collections; electronic devices
		Describe		
		General household electron	nics	\$500.00
8.	Example ■ No	bles of value es: Antiques and figurines; paintings, prints, or othe other collections, memorabilia, collectibles  Describe	er artwork; books, pictures, or other art objects; stamp, coin	, or baseball card collections;
9.	Equipme Example	ent for sports and hobbies	y equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
10	. <b>Firearm</b> Examp ■ No		ed equipment	
11	□ No	s eles: Everyday clothes, furs, leather coats, designer Describe	wear, shoes, accessories	
		Clothing		\$500.00
12	□ No ´		ent rings, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
		Assorted jewelry		\$90.00
13	Examp  ■ No	rm animals bles: Dogs, cats, birds, horses Describe		
14	■ No	ner personal and household items you did not a	already list, including any health aids you did not list	
1		he dollar value of all of your entries from Part 3, write that number here	, including any entries for pages you have attached	\$2,590.00
Pa	art 4: Des	scribe Your Financial Assets		
D	o you ow	n or have any legal or equitable interest in any	of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16	. <b>Cash</b> <i>Examp</i> □ No	eles: Money you have in your wallet, in your home, i	in a safe deposit box, and on hand when you file your petiti	ion

D	ebtor 1	Bajram Balidemic	Case number (if known)	
	Yes.			
			Cash	\$20.00
17.		sits of money  ples: Checking, savings, or other financial accounts institutions. If you have multiple accounts	ounts; certificates of deposit; shares in credit unions, brokerage houses, and s with the same institution, list each.	d other similar
	■ No □ Yes		Institution name:	
18.	Bonds	s, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with bro	okerage firms, money market accounts	
		Institution or issuer	name:	
19.		ublicly traded stock and interests in incorpo venture	orated and unincorporated businesses, including an interest in an LLC	;, partnership, and
		Give specific information about themName of entity:	 % of ownership:	
20.	Negot		otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	☐ Yes.	Give specific information about them Issuer name:		
21.		ment or pension accounts ples: Interests in IRA, ERISA, Keogh, 401(k), 4	403(b), thrift savings accounts, or other pension or profit-sharing plans	
	_	List each account separately.  Type of account:	Institution name:	
22.	Your s Exam	ity deposits and prepayments share of all unused deposits you have made so ples: Agreements with landlords, prepaid rent,	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companies, or other	ers
	■ No □ Yes.		Institution name or individual:	
23.	_	ties (A contract for a periodic payment of mone	ey to you, either for life or for a number of years)	
	■ No □ Yes.	Issuer name and description.		
24.	26 U.S.	ets in an education IRA, in an account in a qu.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	ualified ABLE program, or under a qualified state tuition program.	
	■ No □ Yes.	Institution name and description	n. Separately file the records of any interests.11 U.S.C. § 521(c):	
25.	Trusts	s, equitable or future interests in property (o	other than anything listed in line 1), and rights or powers exercisable fo	or your benefit
	☐ Yes.	Give specific information about them		
26.		ts, copyrights, trademarks, trade secrets, an ples: Internet domain names, websites, procee		
	☐ Yes.	Give specific information about them		
27.		ses, franchises, and other general intangible ples: Building permits, exclusive licenses, coop	es perative association holdings, liquor licenses, professional licenses	
		Give specific information about them		

Debtor 1	Bajram Balidemic		Case number (if kno	own)
Money o	or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	refunds owed to you			
□ No ■ Ye:		em, including whether you alread	y filed the returns and the tax years	
		Potential Tax Refunds	2022 Federa and Loc	•
<i>Exai</i> ■ No	•	y, spousal support, child support	maintenance, divorce settlement, prop	perty settlement
Exar	benefits; unpaid loans you m		s, sick pay, vacation pay, workers' cor	npensation, Social Security
31. Inter	ests in insurance policies	ance; health savings account (HS	A); credit, homeowner's, or renter's ins	surance
	s. Name the insurance company of e Company n		Beneficiary:	Surrender or refund value:
If yo	interest in property that is due you use the beneficiary of a living trust, eone has died.		rance policy, or are currently entitled to	receive property because
☐ Ye:	s. Give specific information			
Exar ■ No	ns against third parties, whether omples: Accidents, employment disputs.  Describe each claim	or not you have filed a lawsuit of tes, insurance claims, or rights to	or made a demand for payment sue	
34. Othe	r contingent and unliquidated cla	ims of every nature, including o	ounterclaims of the debtor and righ	ts to set off claims
■ No □ Yes	s. Describe each claim			
	financial assets you did not alread	dy list		
■ No □ Yes	s. Give specific information			
	d the dollar value of all of your ent Part 4. Write that number here	,	entries for pages you have attached	\$20.00
Part 5:	Describe Any Business-Related Proper	rty You Own or Have an Interest In.	List any real estate in Part 1.	
_ `	u own or have any legal or equitable ir Go to Part 6.	nterest in any business-related prop	erty?	

Official Form 106A/B Schedule A/B: Property page 4

 $\square$  Yes. Go to line 38.

Debtor 1	Bajram Balidemic		Case number (if known)	
	rescribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>Do yo</b>	ou own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
-	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
53. <b>Do yo</b>	ou have other property of any kind you did not already list?	•		
	nples: Season tickets, country club membership			
■ No				
☐ Yes	s. Give specific information			
54. Add	the dollar value of all of your entries from Part 7. Write the	at number here	_	\$0.00
				*
	1: Total real estate, line 2			\$0.00
	2: Total vehicles, line 5	\$0.00		
	3: Total personal and household items, line 15	\$2,590.00		
58. <b>Part</b>	4: Total financial assets, line 36	\$20.00		
59. <b>Part</b>	5: Total business-related property, line 45	\$0.00		
60. <b>Part</b>	6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>Part</b>	7: Total other property not listed, line 54 +	\$0.00		
62. <b>Tota</b>	al personal property. Add lines 56 through 61	\$2,610.00	Copy personal property total	\$2,610.00
63. <b>Tota</b>	al of all property on Schedule A/B. Add line 55 + line 62			\$2,610.00

	Cash		\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
	Line nom ochedule	y D. 1211			100% of fair market value, up to any applicable statutory limit	
	Assorted jewelry		\$90.00		\$90.00	11 U.S.C. § 522(d)(4)
	Line from Generale	v <i>D</i> . 1111			100% of fair market value, up to any applicable statutory limit	
	Clothing Line from Schedule	 4/B: <b>11</b> .1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	General househo		\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
					100% of fair market value, up to any applicable statutory limit	
	Household goods		şs \$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Brief description of the Schedule A/B that list		on Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
2.	•	•	- , , , ,	empt,	fill in the information below.	
	_		s. 11 U.S.C. § 522(b)(2)			
١.		•	onbankruptcy exemptions.	•	, , ,	
	art 1: Identify the P		n as Exempt iming? Check one only, eve	n if ve	our angues is filing with you	
spo any fur exc to	ecific dollar amount a y applicable statutory nds—may be unlimite emption to a particula the applicable statuto	as exempt. Alterna I limit. Some exend In dollar amound In dollar amount a In dollar amount a In dollar amount.	atively, you may claim the f nptions—such as those for it. However, if you claim an and the value of the proper	iull fa heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
he nee	property you listed on	Schedule A/B: Pro	operty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
			perty You Cla		<u>-</u>	4/22
0	fficial Form 1	06C				<b>.</b>
	ase number known)					☐ Check if this is an amended filing
Uı	nited States Bankruptc	y Court for the:	EASTERN DISTRICT OF N	EW Y	ORK	
	ebtor 2 pouse if, filing) First	Name	Middle Name	L	ast Name	
		Name	Middle Name	L	ast Name	
		ram Balidemic				

Line from Schedule A/B: 16.1

100% of fair market value, up to any applicable statutory limit

\$20.00

Deb	otor 1	Bajram Balidemic		Case number (if	·
		description of the property and line on dule A/B that lists this property	Current value of the portion you own	Amount of the exemption you clair	n Specific laws that allow exemption
			Copy the value from Schedule A/B	Check only one box for each exempt	on.
		Prederal, State and Local:	Unknown	<b>\$15,400</b>	11 U.S.C. § 522(d)(5)
		from Schedule A/B: 28.1			•
3.	(Subj	rou claiming a homestead exemption ect to adjustment on 4/01/25 and every			ustment.)
		Yes. Did you acquire the property cover   □ No □ Yes	ed by the exemption wi	nin 1,215 days before you filed this	s case?

ation to identify your	case:			
Bajram Balidemio	;			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
kruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
				☐ Check if this is an
				amended filing
	Bajram Balidemic First Name	First Name Middle Name	Bajram Balidemic       First Name     Middle Name     Last Name       First Name     Middle Name     Last Name	Bajram Balidemic  First Name Middle Name Last Name  First Name Middle Name Last Name

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

Fill in this info	ormation to identify your car	se:					
Debtor 1	Bajram Balidemic						
	First Name	Middle Name	Last Nam	ne			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	ne			
United States I	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK				
C							
(if known)						☐ Check	if this is an
						_	ed filing
Official Fo	rm 106E/F						
	E/F: Creditors Wh	o Have Unsecu	red Claim				12/15
Schedule G: Exe Schedule D: Cre left. Attach the C	ontracts or unexpired leases the cutory Contracts and Unexpire ditors Who Have Claims Secure continuation Page to this page. number (if known).	d Leases (Official Form 10 ed by Property. If more sp	06G). Do not incl ace is needed, c	ude any cree opy the Part	ditors with partially s you need, fill it out, i	ecured claims that a number the entries ir	re listed in the boxes on the
Part 1: List	All of Your PRIORITY Unse	cured Claims					
1. Do any cred	ditors have priority unsecured of	laims against you?					
☐ No. Go to	o Part 2.						
Yes.							
identify what possible, list	our priority unsecured claims. It type of claim it is. If a claim has the claims in alphabetical order are than one creditor holds a partic	ooth priority and nonpriority according to the creditor's na	amounts, list that ame. If you have r	claim here ar	nd show both priority a	nd nonpriority amount	s. As much as
(For an expl	anation of each type of claim, see	the instructions for this form	m in the instruction	n booklet.)	Total claim	Priority	Nonpriority
					Total Claim	amount	amount
	nal Revenue Service	Last 4 digits of	account number		\$1,627.00	\$1,627.00	\$0.00
,	Creditor's Name	When was the	dobt incurred?	2021			
	delphia, PA 19101-7346	Wilen was the	debt illculred :	2021			
	r Street City State Zip Code	As of the date y	ou file, the clain	is: Check a	II that apply		
Who incur	red the debt? Check one.	☐ Contingent					
Debtor	1 only	☐ Unliquidated					
☐ Debtor	2 only	☐ Disputed					
☐ Debtor	1 and Debtor 2 only	Type of PRIORI	TY unsecured cl	aim:			
☐ At least	one of the debtors and another	☐ Domestic su	pport obligations				
☐ Check	if this claim is for a community	debt Taxes and co	ertain other debts	you owe the	government		
	m subject to offset?			•	u were intoxicated		
■ No		☐ Other. Speci					
☐ Yes			Federal In	come Tax	(		

Debtor 1 Bajram Balidemic		Case numb	oer (if known)		
2.2 NYS Dept of Tax & Finance	Last 4 digits of account number		\$33.00	\$33.00	\$0.00
Priority Creditor's Name  Bankruptcy Unit TCD  Building 8 Room 455	When was the debt incurred?	2021			<b>V</b> 0.00
WA Harriman State Campus Albany, NY 12227					
Number Street City State Zip Code	As of the date you file, the claim	is: Check all tha	at apply		
Who incurred the debt? Check one.	☐ Contingent				
■ Debtor 1 only	☐ Unliquidated				
Debtor 2 only	☐ Disputed				
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	aim:			
$\square$ At least one of the debtors and another	☐ Domestic support obligations				
☐ Check if this claim is for a community debt	■ Taxes and certain other debts	ou owe the gove	ernment		
Is the claim subject to offset?	Claims for death or personal in	iury while you we	ere intoxicated		
■ No	Other. Specify				
☐ Yes	State Inco	me Taxes			
Yes.  List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each of than one creditor holds a particular claim, list the other Part 2.	laim. For each claim listed, identify w	nat type of claim	it is. Do not list claims al	ready included in Part	1. If more
				Total clain	n
Internal Revenue Service	Last 4 digits of account numb	er		\$	39,357.00
Nonpriority Creditor's Name PO Box 7346	When was the debt incurred?	Prior to	2019		
Philadelphia, PA 19101-7346	When was the dept incurred:	1110110	2010		
Number Street City State Zip Code	As of the date you file, the cla	im is: Check all	that apply		
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsec	ured claim:			
Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a s report as priority claims	eparation agree	ment or divorce that you	did not	
No	Debts to pension or profit-sh	aring plans, and	other similar debts		
☐ Yes	Other. Specify Federal				
□ res	Other. Specify	income rax			

Deptor	1 Bajram Balidemic	Case number (if known)	
4.2	Maimonides Medical Center Nonpriority Creditor's Name 4802 10th Ave	Last 4 digits of account number 1328  When was the debt incurred?	\$318.00
	Brooklyn, NY 11219	When was the dest mounted.	
-	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce tha	t vou did not
	Is the claim subject to offset?	report as priority claims	.,,
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical debt	
4.3	NYS Dept of Tax & Finance	Last 4 digits of account number	\$155,569.03
ш.	Nonpriority Creditor's Name		
	Bankruptcy Unit TCD	When was the debt incurred? Prior to 2018	
	Building 8 Room 455 WA Harriman State Campus Albany, NY 12227		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce tha	t you did not
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify State Income Taxes	
Part 3:	List Others to Be Notified About a De	ebt That You Already Listed	
is tryir have r	ng to collect from you for a debt you owe to s	about your bankruptcy, for a debt that you already listed in Parts 1 or omeone else, list the original creditor in Parts 1 or 2, then list the coll at you listed in Parts 1 or 2, list the additional creditors here. If you do or submit this page.	ection agency here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
	Registration	Line 4.3 of (Check one):	nsecured Claims
PO Bo	ension Unit ox 149005	■ Part 2: Creditors with Nonprior	ity Unsecured Claims
Staten	Island, NY 10314	Last 4 digits of account number	
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Driver NYS D	Improvement Unit	Line 4.3 of (Check one):	
	ire State Plaza	■ Part 2: Creditors with Nonprior	ity Unsecured Claims
Room			
Alban	y, NY 12228		
		Last 4 digits of account number	
	nd Address	On which entry in Part 1 or Part 2 did you list the original creditor?	
Maimo		Line 4.2 of (Check one):	
	ayment ox 2398	Part 2: Creditors with Nonprior	ity Unsecured Claims
	a, NE 68103-2398		
	,	Last 4 digits of account number	

Debtor 1 Bajram Balidemic		Case number (if known)	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
NYC Register's Office	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
66 John Street New York, NY 10036		■ Part 2: Creditors with Nonpriority Unsecured Claims	
New 101K, N1 10050	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
NYS Dept of Tax & Finance	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
Bankruptcy Section P.O. Box 5300		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Albany, NY 12205			
•	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
NYS DMV Brooklyn	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
625 Atlantic Avenue Second Floor		■ Part 2: Creditors with Nonpriority Unsecured Claims	
Brooklyn, NY 11217			
,	Last 4 digits of account number	8684	
Name and Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Professional Claim Bureau	Line 4.2 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims	
PO Box 9060 Hicksville, NY 11802-9060		■ Part 2: Creditors with Nonpriority Unsecured Claims	
11101341110, 141 11002-3000	Last 4 digits of account number	7261	

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
al ims				
m Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 1,660.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 1,660.00
				Total Claim
tal	6f.	Student loans	6f.	\$ 0.00
ims				
m Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 195,244.03
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 195,244.03

Fill in this infor				
Debtor 1	Bajram Balidemio	;		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number (if known)				☐ Check if this is an
				amended filing

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the c	ontract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	-				
	Name				_
	Number	Street			
	City		State	ZIP Code	_
	,				

Fill in thi	s information to identify your	case:			
Debtor 1	Bajram Balidemi				
D - l- ( 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT (	OF NEW YORK		
Case nun	pher				
(if known)					Check if this is an amended filing
Officia	al Form 106H				
	dule H: Your Cod	ebtors			12/15
people are ill it out, a our name		ally responsible for sup boxes on the left. Attac . Answer every question	plying correct informati h the Additional Page to n.	on. If more space is ne this page. On the top	te as possible. If two married beded, copy the Additional Page, of any Additional Pages, write
_	· · · · · · · · · · · · · · · · · · ·	you are ming a joint case,	do not list either spouse	as a codebior.	
■ No □ Ye					
	thin the last 8 years, have you na, California, Idaho, Louisiana				states and territories include
■ No	. Go to line 3.				
`	s. Did your spouse, former spo	use, or legal equivalent liv	e with you at the time?		
in lin Form	e 2 again as a codebtor only i	f that person is a guarai	ntor or cosigner. Make s	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
	Name			□ Schedule E/F, lir	
				☐ Schedule G, line	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lir	ne
	Number Street City	State	ZIP Code	=	<u> </u>
	•				

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

=:11										
	in this information to identify your ca									
Del	btor 1 Bajram Balio	demic			_					
1 -	btor 2									
Uni	ited States Bankruptcy Court for the	: EASTERN DISTRICT	OF NEW YORK							
1	se number nown)							ed filing ent showir	ng postpetition	
0	fficial Form 106I					_	MM / DD/ \		ollowing date.	
S	chedule I: Your Inc	ome				Į,	VIIVI / DD/	1111		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing wi	th you, do not inc	ude infor	mati	on abou	t your sp	ouse. If m	ore space is	needed,
Fill in your employment information.			Debtor 1				Debtor :	2 or non-f	iling spouse	
If you have	If you have more than one job,	Employment status	■ Employed				☐ Empl	loyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not e	employed		
		Occupation	Superintender	nt						
	Include part-time, seasonal, or self-employed work.	Employer's name	360 Ocean Parkway Owners Corp.							
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here? 23 Ye	ars			_			
Pai	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to	report for	any	line, writ	e \$0 in the	e space. In	clude your no	n-filing
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informat	on for all	empl	oyers for	that perso	on on the I	ines below. If	you need
						For De	btor 1		ebtor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1	,291.33	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add lir	ne 2 + line 3.		4.	\$	1.2	91.33	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Bajram Balidemic		(	Case	number (if kn	own)				
					For	Debtor 1			Debtor -filing s		
	Сор	y line 4 here	4.		\$	1,291	.33	\$		N/A	-
5.	List	all payroll deductions:									
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$_ \$		0.24	\$_ \$		N/A N/A	-
	5c.	Voluntary contributions for retirement plans	50	<b>)</b> .	\$		.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	50	d.	\$	0	.00	\$		N/A	-
	5e.	Insurance	5e		\$		.00	\$		N/A	-
	5f.	Domestic support obligations	5f.		\$		.00	\$		N/A	_
	5g.	Union dues	59		\$_		.00	\$_		N/A	-
	5h.	Other deductions. Specify: Rent	_ 5n	1.+	\$		0.00	_		N/A	-
		NYS Garnishment			\$		).13	\$		N/A	=
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_		.37	\$_		N/A	-
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	621	.96	\$		N/A	-
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	<b>a</b> .	\$	O	0.00	\$		N/A	
	8b.	Interest and dividends	8b	<b>)</b> .	\$		.00	\$		N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	<b>.</b>	\$		0.00	\$		N/A	-
	8d.	Unemployment compensation	80	d.	\$	0	.00	\$		N/A	-
	8e.	Social Security	86	€.	\$	1,875	.00	\$		N/A	-
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.		\$	O	0.00	\$		N/A	
	8g.	Pension or retirement income	_ 8g	j.	\$	0	.00	\$		N/A	-
	8h.	Other monthly income. Specify:	_ 8h	1.+	\$	C	.00	+ \$		N/A	-
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	;	\$	1,875	5.00	\$		N/A	A
10.	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		2,496.96	+ \$		N/A	= \$	2,496.96
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				_,	Ľ		,,, .		2, 100100
11.	11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00										
12.		the amount in the last column of line 10 to the amount in line 11. The rest is that amount on the Summary of Schedules and Statistical Summary of Certain ies							12.	\$Combin	
13.	Do y	you expect an increase or decrease within the year after you file this form?	?							montrii	y income
		No.									Ī
		Yes. Explain:									

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:							
Deb	otor 1 Bajram Balidemic		Check	if this is:				
			☐ An amended filing					
	ouse, if filing)				ving postpetition chapter the following date:			
(Opt	ouse, ii ming)			o expenses as or t				
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YO	ORK	N	IM / DD / YYYY				
	se number							
	fficial Form 106J							
	chedule J: Your Expenses				12/15			
info	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this f mber (if known). Answer every question.							
Par 1.	t 1: Describe Your Household Is this a joint case?							
	No. Go to line 2.							
	Yes. Does Debtor 2 live in a separate household?							
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	hold of Debto	r 2.				
2.	Do you have dependents? ■ No							
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state the dependents names.				□ No			
	aspondonto namos.				□ No			
					☐ Yes			
					□ No			
					☐ Yes			
					□ No			
_	Da vasus aumanaaa inaliyda				☐ Yes			
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes							
Par	t 2: Estimate Your Ongoing Monthly Expenses							
exp	timate your expenses as of your bankruptcy filing date unless your expenses as of a date after the bankruptcy is filed. If this is a suppolicable date.							
	lude expenses paid for with non-cash government assistance if value of such assistance and have included it on <i>Schedule I:</i> Y	•						
(Of	ficial Form 106I.)			Your expe	enses			
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$		0.00			
	If not included in line 4:							
	4a. Real estate taxes		4a. \$		0.00			
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00			
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		35.00			
5.	4d. Homeowner's association or condominium dues	mo oquity loons	4d. \$ 5. \$	-	0.00			
J.	Additional mortgage payments for your residence, such as hor	me equity loans	J. Þ		0.00			

Debtor 1 Bajram Balidemic	Case number (if known)
5. Utilities:	
6a. Electricity, heat, natural gas	6a. \$ <b>200.</b>
6b. Water, sewer, garbage collection	6b. \$ <b>0.</b>
6c. Telephone, cell phone, Internet, satellite, and cab	·
6d. Other. Specify:	6d. \$ <b>0.</b>
. Food and housekeeping supplies	7. \$ 660.
0. 1.	·
O. Personal care products and services	10. \$
Medical and dental expenses	11. \$ <b>125.</b>
2. <b>Transportation.</b> Include gas, maintenance, bus or train	tare. 12. \$ <b>275.</b>
Do not include car payments.  B. Entertainment, clubs, recreation, newspapers, maga	·
4. Charitable contributions and religious donations	·
<u> </u>	14. \$ <b>75.</b>
<ol><li>Insurance.</li><li>Do not include insurance deducted from your pay or incl</li></ol>	udod in lines 4 or 20
15a. Life insurance	15a. \$ <b>0.</b>
15b. Health insurance	15b. \$ <b>0.</b>
	·
15c. Vehicle insurance	15c. \$ <b>264.</b>
15d. Other insurance. Specify:	15d. \$
6. <b>Taxes.</b> Do not include taxes deducted from your pay or	
Specify:	16. \$ <b>0.</b>
7. Installment or lease payments:	47- •
17a. Car payments for Vehicle 1	17a. \$
17b. Car payments for Vehicle 2	17b. \$ <b>0.</b>
17c. Other. Specify:	17c. \$ <b>0.</b>
17d. Other. Specify:	17d. \$ <b>0.</b>
<ol><li>Your payments of alimony, maintenance, and suppo</li></ol>	
deducted from your pay on line 5, Schedule I, Your I	income (Official Forfil 1001).
<ol><li>Other payments you make to support others who do</li></ol>	
Specify:	19.
Other real property expenses not included in lines 4	
20a. Mortgages on other property	20a. \$ <b>0.</b>
20b. Real estate taxes	20b. \$ <b>0.</b>
20c. Property, homeowner's, or renter's insurance	20c. \$ <b>0.</b>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <b>0.</b>
20e. Homeowner's association or condominium dues	20e. \$ <b>0.</b>
. Other: Specify: Pet Expenses	21. +\$ 75.
1 of Exponess	
2. Calculate your monthly expenses	
22a. Add lines 4 through 21.	\$2,409.00
22b. Copy line 22 (monthly expenses for Debtor 2), if an	y, from Official Form 106J-2 \$
22c. Add line 22a and 22b. The result is your monthly e	xpenses. \$ 2,409.00
3. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from	
23b. Copy your monthly expenses from line 22c above	. 23b\$ <b>2,409.</b>
23c. Subtract your monthly expenses from your month	y income.
The result is your monthly net income.	23c. \$ <b>87.</b>
•	
4. Do you expect an increase or decrease in your expe	
	hin the year or do you expect your mortgage payment to increase or decrease because
modification to the terms of your mortgage?	
■ No.	
☐ Yes. Explain here:	

Fill in this in	nformation to identify your	case:			
Debtor 1	Bajram Balidemio				
DCDIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number	er				
(if known)					☐ Check if this is an
					amended filing
	orm 106Dec ration About a	ın Individual	Debtor's Sc	hedules	12/15
f two marrie	ed people are filing together	r, both are equally respor	nsible for supplying corr	rect information.	
You must file	e this form whenever you fi	le bankruptcy schedules	or amended schedules.	. Making a false stateme	ent, concealing property, or
obtaining me	oney or property by fraud in	n connection with a bank			or imprisonment for up to 20
years, or bot	th. 18 U.S.C. §§ 152, 1341, 1	519, and 3571.			
	Sign Below				
Did yo	u pay or agree to pay some	one who is NOT an attori	ney to help you fill out b	ankruptcy forms?	
■ No	0				
ПΥ	es. Name of person			Attach Bankru	otcy Petition Preparer's Notice,
					nd Signature (Official Form 119)
	penalty of perjury, I declare by are true and correct.	that I have read the sumi	mary and schedules filed	d with this declaration	and
that the	ey are true and correct.				
X /s/	Bajram Balidemic		X		
	jram Balidemic		Signature of I	Debtor 2	
Sigi	nature of Debtor 1				
Dat	e January 23, 2023		Date		

Fill	in this info	rmation to identify you	r case:			
Del	btor 1	Bajram Balidem				
Dei	btor 2	First Name	Middle Name	Last Name		
	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States E	Bankruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Cas	se number					
(if kr	nown)				_	Check if this is an amended filing
<b>~</b> ¹	:c: -: - 1 <b>-</b>	407				
		orm 107	Affaira far Indivi	duala Eilina far E	) on krijintov	0.1/0/
				duals Filing for E	. ,	04/22
info	rmation. If		attach a separate sheet to		e equally responsible for su y additional pages, write yo	
		,	rital Status and Where You	ı Lived Before		
1.		our current marital statu				
	☐ Marrie	ea arried				
_						
2.	During the	e last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. I	ist all of the places you li	ived in the last 3 years. Do n	ot include where you live nov	N.	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior A	ddress:	Dates Debtor 2 lived there
<b>3.</b> state					nity property state or territor Rico, Texas, Washington and V	
	No					
	☐ Yes. I	Make sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Pai	rt 2 Exp	ain the Sources of You	r Income			
4.	Fill in the to	otal amount of income yo	u received from all jobs and	ng a business during this y all businesses, including par e together, list it only once u		endar years?
	□ No					
	Yes.	Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calend inuary 1 to	dar year: December 31, 2022 )	■ Wages, commissions, bonuses, tips	\$19,837.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Del	Debtor 1 Bajram Balidemic						Cas	Case number (if known)				
					Debtor 1			Debtor 2				
					Sources of income Check all that apply.	(be	oss income fore deductions and clusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
			■ Wages, commissions, bonuses, tips			☐ Wages, combonuses, tips	imissions,					
					☐ Operating a business			☐ Operating a	business			
For the calendar year: (January 1 to December 31, 2020)				■ Wages, commissions, bonuses, tips			☐ Wages, commissions, bonuses, tips					
	□ O <sub>F</sub>			☐ Operating a business	g a business			business				
<ul> <li>5. Did you receive any other income during this year or the two previous calendar years?         Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Securi and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gar winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.     </li> <li>List each source and the gross income from each source separately. Do not include income that you listed in line 4.</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul> <li>Debtor 1</li>												
					Sources of income Describe below.	ea (be	oss income from ch source fore deductions and clusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)		
Par	rt 3:	List	Certain Pa	yments You	Made Before You Filed for	or Bankı	uptcy					
6.	Are	<b>eithe</b> r No.	Neither De	ebtor 1 nor D	's debts primarily consun Debtor 2 has primarily con personal, family, or house	sumer o	debts. Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an		
During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?  No. Go to line 7.  Yes List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, or												
not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.												
Yes. <b>Debtor 1 or Debtor 2 or both have primarily consumer debts.</b> During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?												
			No.	Go to line 7								
			□ <sub>Yes</sub>	include pay	each creditor to whom you pents for domestic suppor this bankruptcy case.							
	Cre	ditor'	s Name and	d Address	Dates of payr	ment	Total amount paid	Amount you still owe	Was this p	payment for		
							-					

Case 1-23-40289-nhl Doc 1 Filed 01/27/23 Entered 01/27/23 09:04:39 Debtor 1 **Bajram Balidemic** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimonv. Nο Yes. List all payments to an insider. **Insider's Name and Address** Total amount Amount you Reason for this payment Dates of payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? 9 List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο ☐ Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the Date property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο ☐ Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

Describe the gifts

Value

Dates you gave

the gifts

per person

Address:

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600

Person to Whom You Gave the Gift and

Case 1-23-40289-nhl Doc 1 Filed 01/27/23 Entered 01/27/23 09:04:39 Debtor 1 Bajram Balidemic Case number (if known) 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  $\square$  No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Gambling 2022 \$4,000,00 Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred Address or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Corash & Hollender PC See Disclosure of Compensation \$0.00 1200 South Ave Ste 201 Statement Staten Island, NY 10314 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No ☐ Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment made 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not

Description and value of

property transferred

Date transfer was

made

Describe any property or payments received or debts

paid in exchange

Address

Yes. Fill in the details. Person Who Received Transfer

Person's relationship to you

include gifts and transfers that you have already listed on this statement.

Debtor 1 **Bajram Balidemic** Case number (if known) 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details. п Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance account number instrument closed, sold. before closing or Address (Number, Street, City, State and ZIP Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- - No
  - Yes. Fill in the details.

**Owner's Name** Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Dec	Debtor 1 Bajram Baildemic Case number (if known)							
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  ■ No □ Yes. Fill in the details.  Name of site ■ Governmental unit ■ Environmental law, if you ■ Date of notice							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Environmental law, if you Address (Number, Street, City, State and ZIP Code) know it						
25.	Have you notified any governmental unit of an	y release of hazardous material?						
	Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice			
26.	26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  ■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	11: Give Details About Your Business or Co	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have a	ny of	the following connections to any	business?			
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity	, eith	er full-time or part-time				
	☐ A member of a limited liability compan	y (LLC) or limited liability partners	hip (L	LP)				
	☐ A partner in a partnership							
	☐ An officer, director, or managing exec	utive of a corporation						
	☐ An owner of at least 5% of the voting of	or equity securities of a corporation	1					
	■ No. None of the above applies. Go to Par	t 12.						
	Yes. Check all that apply above and fill in	the details below for each busines	SS.					
	Business Name D Address	escribe the nature of the business ame of accountant or bookkeeper	•	Employer Identification number Do not include Social Security I Dates business existed				
28.	Dates business existed  Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							

**Date Issued** 

No

Name

Yes. Fill in the details below.

Address (Number, Street, City, State and ZIP Code)

Debtor	1 Bajram Balidemic		Case number (if known)
Part 12	2: Sign Below		
are true		king a false statement, concealing	hments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection or up to 20 years, or both.
/s/ Ba	jram Balidemic		
Bajram Balidemic Signature of Debtor 1		Signature of Debt	or 2
Date	January 23, 2023	Date	
Did you	attach additional pages to Your Si	tatement of Financial Affairs for In	dividuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you	ı pay or agree to pay someone who	is not an attorney to help you fill	out bankruptcy forms?
■ No			
☐ Yes.	Name of Person Attach the E	Bankruptcy Petition Preparer's Notice	e, Declaration, and Signature (Official Form 119).

Fill in this info	mation to identify your	case:			
Debtor 1	Bajram Balidemi				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK		
Case number (if known)				_	if this is an ed filing
Official Fo		n for Individu	uals Filing Under	Chapter 7	12/15
creditors hav	ve claims secured by yo	pter 7, you must fill out to our property, or and the lease has not exp			
				by the date set for the meeting	

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

## Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□No
name:	☐ Retain the property and redeem it.	
Description of property	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Debtor 1	Bajram Balidemic	Case number (if known)	
name: Descrip propert securin		<ul> <li>□ Retain the property and redeem it.</li> <li>□ Retain the property and enter into a Reaffirmation Agreement.</li> <li>□ Retain the property and [explain]:</li> </ul>	□ Yes
in the info You may a	nexpired personal property lease that yo ormation below. Do not list real estate lea assume an unexpired personal property	u listed in Schedule G: Executory Contracts and Unexpire ses. Unexpired leases are leases that are still in effect; the ease if the trustee does not assume it. 11 U.S.C. § 365(p)(2)	e lease period has not yet ended. 2).
Describe	your unexpired personal property lease	S	Will the lease be assumed?
Lessor's r			□ No
Description Property:	on of leased		□ v
r roporty.			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
			□ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
			L res
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
-1 - 7			Li Tes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
, ,			L les
Lessor's r			□ No
Property:	on of leased		☐ Yes
			_ 100
Lessor's r			□ No
Property:	on of leased		☐ Yes
			00

Debtor	Bajram Balidemic	Case number (if known)
Deut O	Ciara Balann	
Part 3:	Sign Below	
	enalty of perjury, I declare that I have indicate that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X /s/	Bajram Balidemic	X
Bajram Balidemic		
Ba	jram Balidemic	Signature of Debtor 2
	jram Balidemic nature of Debtor 1	Signature of Debtor 2

Fill in this infor	mation to identify your case:					lirected in this form and	l in Form
Debtor 1	Bajram Balidemic		123	2A-1Supp	:		
Debtor 2 (Spouse, if filing)				■ 1. Ther	e is no pres	umption of abuse	
United States	Bankruptcy Court for the: Eastern District of	New York		арр	lies will be n	to determine if a presul nade under <i>Chapter 7</i>	
Case number					`	icial Form 122A-2).	
(if known)						does not apply now be y service but it could ap	
				☐ Checl	cif this is a	in amended filing	
Official F	<u>orm 122A - 1</u>						
Chapter	7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/19
attach a separat case number (if qualifying milita	and accurate as possible. If two married people a e sheet to this form. Include the line number to w known). If you believe that you are exempted fror ry service, complete and file Statement of Exemp	hich the additior n a presumption	nal information a of abuse becau	applies. On se you do	the top of a not have prin	ny additional pages, wri marily consumer debts o	te your name and or because of
	alculate Your Current Monthly Income						
_	your marital and filing status? Check one on	ly.					
	arried. Fill out Column A, lines 2-11.						
	ed and your spouse is filing with you. Fill ou			2-11.			
	ed and your spouse is NOT filing with you.	•	•				
	ing in the same household and are not lega				•		
pe	ing separately or are legally separated. Fill on the laty of perjury that you and your spouse are leading apart for reasons that do not include evading	egally separated	d under nonban	kruptcy la	w that appli	es or that you and you	
101(10A). Fo the 6 months	erage monthly income that you received from all a rexample, if you are filing on September 15, the 6-m, add the income for all 6 months and divide the total the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 throi sult. Do not includ	ugh August de any inco	31. If the amo	ount of your monthly incor ore than once. For examp	me varied during ole, if both
				Column Debtor 1		Column B Debtor 2 or non-filing spouse	
	ss wages, salary, tips, bonuses, overtime, aductions).	and commission	ons (before all	\$	1,291.33	\$	
•	3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. \$ 0.00 \$						
of you or from an u and room	ints from any source which are regularly par your dependents, including child support. Inmarried partner, members of your household Imates. Include regular contributions from a sp Oo not include payments you listed on line 3.	Include regular , your depende	contributions nts, parents,	\$	0.00	\$	
	me from operating a business, profession,						
			otor 1				
	ceipts (before all deductions)	\$ 0.00					
•	and necessary operating expenses	-\$ 0.00	Copy here ->	¢	0.00	\$	
	hly income from a business, profession, or farm	n \$	Copy Here ->	Ψ	0.00	Ψ	
6. Net inco	me from rental and other real property	Deb	otor 1				
Gross red	ceipts (before all deductions)	\$ 0.00					
	and necessary operating expenses	-\$ 0.00					
	hly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
	dividends, and royalties			\$	0.00	\$	

Case number (if known)

			Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
8.	Unemployment compensation		\$	0.00	\$	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		der			
	For you \$ For your spouse \$	0.00				
a	Pension or retirement income. Do not include any ar	mount received that was a				
9.	benefit under the Social Security Act. Also, except as a not include any compensation, pension, pay, annuity, or United States Government in connection with a disability, or death of a member of the uniformed service pay paid under chapter 61 of title 10, then include that does not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chap	stated in the next sentence, or or allowance paid by the ity, combat-related injury or ces. If you received any retire pay only to the extent that it u would otherwise be entitled	ed	0.00	\$	
10.	Income from all other sources not listed above. Sp		t.			
	Do not include any benefits received under the Social seceived as a victim of a war crime, a crime against hu domestic terrorism; or compensation pension, pay, an United States Government in connection with a disabilidisability, or death of a member of the uniformed service sources on a separate page and put the total below	manity, or international or nuity, or allowance paid by the ity, combat-related injury or ces. If necessary, list other	\$	0.00	\$	
	Total amounts from separate pages, if any.		Φ	0.00	\$	
			+ *	0.00	<b>-</b>	
11.	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column A		1,291.33	+ \$	<b> =</b>  \$	1,291.33
					Total c	current monthly
Part	2: Determine Whether the Means Test Applies	to You			incom	е
12.	Calculate your current monthly income for the year	·				
	12a. Copy your total current monthly income from line	11	Cop	py line 11 r	nere=>	1,291.33
	Multiply by 12 (the number of months in a year)					
	Mulliply by 12 (the number of months in a year)				<b>Y</b> '	12
	Multiply by 12 (the number of months in a year)  12b. The result is your annual income for this part of the	ne form			12h \$	
	12b. The result is your annual income for this part of th	ne form				12 15,495.96
13.						
13.	12b. The result is your annual income for this part of the					
13.	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.	you. Follow these steps:				
13.	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.	you. Follow these steps:  NY  1			12b. \$	15,495.96
13.	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.	you. Follow these steps:  NY  1 of household. online using the link specific	ed in the sepa	rate instruc	12b. \$	
	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go	you. Follow these steps:  NY  1 of household. online using the link specific	ed in the sepa	rate instruc	12b. \$	15,495.96
	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. Line 12b is less than or equal to line 13. Compare the compare that the part of the pa	you. Follow these steps:  NY  1  of household.  online using the link specific ruptcy clerk's office.  On the top of page 1, check be	·		12b. \$13. \$	15,495.96
	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. ■ Line 12b is less than or equal to line 13. C Go to Part 3. Do NOT fill out or file Official 14b. □ Line 12b is more than line 13. On the top of the compare than line 13. On the top of the compare than line 13. On the top of the compare than line 13. On the top of the compare than line 13. On the top of the compare than line 13. On the top of the compare than line 13. On the top of the compare than line 13. On the top of the compare than line 14.	you. Follow these steps:  NY  1  of household. conline using the link specific ruptcy clerk's office.  On the top of page 1, check by Form 122A-2.	oox 1, <i>There is</i>	no presum	13. \$	15,495.96 63,715.00
	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. Line 12b is less than or equal to line 13. Of Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	you. Follow these steps:  NY  1  of household. conline using the link specific ruptcy clerk's office.  On the top of page 1, check by Form 122A-2.	oox 1, <i>There is</i>	no presum	13. \$	15,495.96 63,715.00
14.	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. Line 12b is less than or equal to line 13. Compared to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	you. Follow these steps:  NY  1  of household. conline using the link specific cruptcy clerk's office.  On the top of page 1, check by 1 Form 122A-2. of page 1, check box 2, <i>The</i>	oox 1, There is	no presum	13. \$ tions \$ aption of abuse. determined by Form 12	15,495.96 63,715.00
14.	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. ■ Line 12b is less than or equal to line 13. On Go to Part 3. Do NOT fill out or file Official 14b. □ Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A−2.  3: Sign Below  By signing here, I declare under penalty of perjury	you. Follow these steps:  NY  1  of household. conline using the link specific cruptcy clerk's office.  On the top of page 1, check by 1 Form 122A-2. of page 1, check box 2, <i>The</i>	oox 1, There is	no presum	13. \$ tions \$ aption of abuse. determined by Form 12	15,495.96 63,715.00
14.	12b. The result is your annual income for this part of the Calculate the median family income that applies to Fill in the state in which you live.  Fill in the number of people in your household.  Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank How do the lines compare?  14a. Line 12b is less than or equal to line 13. On Go to Part 3. Do NOT fill out or file Official 14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A–2.  3: Sign Below	you. Follow these steps:  NY  1  of household. conline using the link specific cruptcy clerk's office.  On the top of page 1, check by 1 Form 122A-2. of page 1, check box 2, <i>The</i>	oox 1, There is	no presum	13. \$ tions \$ aption of abuse. determined by Form 12	15,495.96 63,715.00

**Bajram Balidemic** 

Debtor 1

Debtor 1	Bajram Balidemic	Case number (if known)			
Da	te January 23, 2023 MM / DD / YYYY				
	If you checked line 14a, do NOT fill out or file Form 122A-2.				
	If you checked line 14b, fill out Form 122A-2 and file it with this form.				

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court** Eastern District of New York

In	re <b>Bai</b>	ram Balide	mic					- 0111	Case No			
						]	Debtor(s)		Chapter	7		
		DIS	CLOSU	RE OF (	COMPENS	SATIO	N OF ATT	ORNE	Y FOR D	ЕВТ	OR(S)	
1.	compens	sation paid to	me within	one year be	fore the filing	of the peti	that I am the a tion in bankrup ection with the	ptcy, or agr	eed to be pai	d to me	, for servic	I that es rendered or to
	For	· legal service	s, I have a	greed to acce	ept				\$	3	3,000.00	
	Prio	or to the filing	g of this sta	atement I hav	ve received				\$	1	,500.00	
									\$	1	,500.00	
2.	The sour	rce of the con	npensation	paid to me v	was:							
		Debtor	-	er (specify):								
3.	The sour	rce of compe	nsation to l	pe paid to me	e is:							
		Debtor		er (specify):								
4.					closed compen	sation wit	h any other per	rson unless	they are me	nbers a	nd associat	tes of my law firm.
							person or perso cople sharing in				sociates of	my law firm. A
5.	In return	n for the abov	e-disclose	d fee, I have	agreed to rend	ler legal s	ervice for all as	spects of the	e bankruptcy	case, ir	ncluding:	
	b. Prepa c. Repr	aration and fi esentation of er provisions \$1,500.00 i services ir meeting; (i client rega Trustee me	ling of any the debtor as needed s limited acluding ii) receivirding a deeting re	r petition, sch at the meetin to pre-peti (i) collectin ng reviewing lebtor's obligarding sta	nedules, stateming of creditors  ition service  ng, reviewing  ng and reply  ligations, ph  andard issue	enent of aff and confi s. Debto g and pro ving to st none call es; (iv) at		which may be ago and any the dard docu esponden discorresponden one credi	ne required; adjourned he ne sum of \$ ments to C ce regardio ondence w tors' meeti	earings of the state of the sta	thereof; 00 for porustee pricase; (iii) ent prior the trustee	st-petition or to first ) counseling
6.	By agree	which are US Trusted limited to, (plus disb	billable a e's Office judicial l ursement	t \$425.00 fo , attendand ien avoidar is for on-lir	or per hour a ce at adjourr nce, relief fro	all attorn ned hear om stay services	ings, prosec or dismissal ), negotiatior	ments, exa ution or d motions o	aminations efense of r or adversa	notion y proc	is, includi ceedings,	legal research
						CERTIF	ICATION					
this		that the foreg		complete state	ement of any a	agreement	or arrangemen	nt for payme	ent to me for	represe	entation of	the debtor(s) in
	January 2	3, 2023				/:	s/Paul Hollend	er				
	Date Date	,				F	Paul Hollende	er				
							ignature of Att					
							Corash & Hol 200 South A					
							200 300111 A Suite 201	TOTIUG				
							Staten Island					
							′18-442-4424 nto@silowfir		3-273-4847			
							nfo@silawfir Iame of law fir					
1						•	Jun	•				

## **United States Bankruptcy Court** Eastern District of New York

In re	Bajram Balidemic		Case No.			
		Debtor(s)	Chapter <b>7</b>			
VERIFICATION OF CREDITOR MATRIX						
credite	The above named debtor(s) or attorned ors) is true and correct to the best of the	* * * * * * * * * * * * * * * * * * * *	fy that the	attached matrix (list of		
Date:	January 23, 2023	/s/Bajram Balidemic Bajram Balidemic				
		Signature of Debtor				

USBC-44 Rev. 9/17/98

DMV Registration Suspension Unit PO Box 149005 Staten Island, NY 10314

Driver Improvement Unit NYS DMV 6 Empire State Plaza Room 336 Albany, NY 12228

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346

Maimonides Carepayment PO Box 2398 Omaha, NE 68103-2398

Maimonides Medical Center 4802 10th Ave Brooklyn, NY 11219

NYC Register's Office 66 John Street New York, NY 10036

NYS Dept of Tax & Finance Bankruptcy Unit TCD Building 8 Room 455 WA Harriman State Campus Albany, NY 12227

NYS Dept of Tax & Finance Bankruptcy Section P.O. Box 5300 Albany, NY 12205

NYS DMV Brooklyn 625 Atlantic Avenue Second Floor Brooklyn, NY 11217

Professional Claim Bureau PO Box 9060 Hicksville, NY 11802-9060

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

CASE NO.:.

**DEBTOR(S):** Bajram Balidemic

<del></del>
Pursuant to Local Bankruptcy Rule 1073-2(b), the debtor (or any other petitioner) hereby makes the following disclosure concerning Related Cases, to the petitioner's best knowledge, information and belief:
[NOTE: Cases shall be deemed "Related Cases" for purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case was pending at any time within eight years before the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are spouses or ex-spouses; (iii) are affiliates, as defined in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a partnership and one or more of its general partners; (vi) are partnerships which share one or more common general partners; or (vii) have, or within 180 days of the commencement of either of the Related Cases had, an interest in property that was or is included in the property of another estate under 11 U.S.C. § 541(a).]
■ NO RELATED CASE IS PENDING OR HAS BEEN PENDING AT ANY TIME.
☐ THE FOLLOWING RELATED CASE(S) IS PENDING OR HAS BEEN PENDING:
1. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE: (Discharged/awaiting discharge, confirmed, dismissed, etc.)
(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
2. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:
CURRENT STATUS OF RELATED CASE:
(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN SCHEDULE "A" OF RELATED CASE:
3. CASE NO.: JUDGE: DISTRICT/DIVISION:
CASE STILL PENDING (Y/N): [If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (Discha	rged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOT	
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ( SCHEDULE "A" OF RELATED CASE:	"REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who be eligible to be debtors. Such an individual will be required to	nave had prior cases dismissed within the preceding 180 days may not file a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORN	IEY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y	/N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or de	ebtor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case as indicated elsewhere on this form.	is not related to any case now pending or pending at any time, except
/s/ Paul Hollender	
Paul Hollender Signature of Debtor's Attorney Corash & Hollender 1200 South Avenue	Signature of Pro Se Debtor/Petitioner
Suite 201 Staten Island, NY 10314 718-442-4424 Fax:718-273-4847	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

NOTE: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009